

ADMINISTRATIVE-INTERNAL USE ONLY

Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2

DD/A Registry

78-1203/12

24 OCT 1978

MEMORANDUM FOR: Chairman, NFAC MAG  
FROM: Charles A. Bohrer, M.D.  
Director of Medical Services  
SUBJECT: After-Hours Emergency Medical Service

The attached memorandum outlines an alternate plan to provide emergency medical service for employees who work after normal duty hours. It is our proposal that the NFAC Advisory Group forward the attached memorandum to those offices which employ personnel after hours.

SIGNED  
CHARLES A. BOHRER, M.D.

Charles A. Bohrer, M.D.

Attachment

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ADMINISTRATIVE-INTERNAL USE ONLY

78-1203/11

24 OCT 1978

STATINTL

MEMORANDUM FOR: Chief, Operations Division, ODP  
Administrative Officer, Operations Center  
Chief, Cable Secretariat Branch, OC  
Chief, [REDACTED] OC  
DDO Duty Officer  
Chief, Headquarters Security Branch, OS  
Chief, Press Branch, OL  
GSA Building Manager

FROM: Charles A. Bohrer, M.D.  
Director of Medical Services

SUBJECT: After-Hours Emergency Medical Service

1. A few months ago the NFAC Management Advisory Group resubmitted a 1974 suggestion which proposed establishing an in-house capability for the initial management of medical emergencies that occur after normal working hours. Staffed with employee volunteers who are state-certified paramedics, these first responders would be responsible for administering basic life support techniques until the McLean Volunteer Fire Department (MVFD) arrives at the scene.

2. The Office of General Counsel (OGC) and the Office of Medical Services (OMS) were tasked again to investigate the feasibility of an Agency emergency medical service (EMS) program. Having thoroughly considered the intricacies of a program of such import, OGC and OMS submitted to the Deputy Director for Administration for his consideration three possible ways to organize the EMS program. As suggested by OGC and OMS, the DDA recommended to the Director of Central Intelligence and received his approval to establish a somewhat formal program using the volunteer services of employees who are state-certified paramedics. There are two reasons for choosing the more formal program. First, it provides for a greater degree of control and administrative support. Second, although increasing the potential liability of the U. S. Government, it reduced the potential liability of the volunteer.

3. Tasked to set up the program, OMS launched a fact-finding study. All the information gathered during the study

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SUBJECT: After-Hours Emergency Medical Service

has been reviewed. It has been determined that the program approved by the DCI cannot be effected at this time, the overriding consideration being the lack of state-certified paramedics.

4. Realizing the minutes saved by the rapid arrival of trained personnel at the scene of a medical emergency are lifesaving, OMS proposes an alternate plan be implemented. This plan requires Agency managers to promulgate CPR and first-aid training for their employees, especially where work conditions involve health risks and for those employees who usually work after normal duty hours. The increased number of trained employees available to institute life-saving measures throughout an emergency would be beneficial to patient care and would greatly complement existing services provided by MVFD. OMS is available to assist in arranging for CPR and first-aid training.

Secondly, the plan recommends that individual offices with employees on duty after normal working hours prepare lists of employees trained in CPR and first aid. This list should be made known to the employees who work after normal hours and also made available to the Security Duty Office for reference. Periodic updating of this list should be accomplished by each office with the update being forwarded to the Security Duty Office.

5. If at some time in the future a sufficient number of employees become state-certified paramedics, the program may be upgraded to the more formal program originally approved by the DCI.

6. The offices involved in studying and evaluating this suggestion are confident that the NFAC Management Advisory Group, as well as the benefactors of this program, will share in a mutual pride and sense of achievement for the successful implementation of a modest EMS program.

SIGNED  
CHARLES A. BOHRER, M.D.

Charles A. Bohrer, M.D.

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ROUTING AND RECORD SHEET			
Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2			
SUBJECT: (Optional) After-Hours Emergency Medical Service			
FROM: Director of Medical Services 1 D 4061, Hqs.		EXTENSION [REDACTED]	NO. 24 OCT 1978
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS
	RECEIVED	FORWARDED	
1. THRU: Deputy Director for Administration			The Agency's operating procedures for handling medical emergencies during and after working hours were reviewed by the Chiefs of the Headquarters Security Branch and the Fairfax County Fire Department. Neither officer could recall or identify any instance since 1968 where emergency vehicles or personnel were delayed in getting to the compound and the patient.
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3. TO: Chairman, NFAC MAG 1 G 53, Hqs.			
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SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM

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**OFFICIAL ROUTING SLIP**

TO	NAME AND ADDRESS	DATE	INITIALS
1	D/OCS	28 SEP 1978	MB
2	Att: Dr. Barker		
3	1 D 4061 Hqs		
4			

"Charly  
 "In replying to this, I suggest you have Security  
 comment on Para 4.d. /s/Jack Blake"

COMMENT	FILE	RECOMMENDATION
CONCURRENCE	INFORMATION	RETURN
Att: DDA 78-1203/10		SIGNATURE

**Remarks:**

Charly

In replying to this, I  
 suggest you have  
 Security comment on Para 4d

cc: D/Sec

SEP 1978

**FOLD HERE TO RETURN TO SENDER**

FROM: NAME, ADDRESS AND PHONE NO.	DATE
Deputy Director for Administration	

7D 24 Hqs [REDACTED] 2001/11/08 : CIA-RDP81-00142R00020001000200000028-2

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STATINTL  
 STATOTHR

MEMORANDUM FOR: Associate Deputy Director for  
Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2

Mike--

*D/OMS*

Here is the MAG response to OMS  
memos on Emergency After-Hours Medical  
Treatment.



AD-M/NFAC

Attachment

STATINTL

Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2  
Date 27 September 1978

DD/A Registry

78 1203/10

22 September 1978

STATINTL MEMORANDUM FOR: [REDACTED]  
Associate Director - Management/NFAC

STATINTL VIA : [REDACTED]  
EO/NFAC

STATINTL FROM : [REDACTED]  
Chairman, NFAC MAG

SUBJECT : Emergency After-Hours Medical Treatment

REFERENCES : a. D/MS memorandum, same subject, dated  
7 August 1978

b. OMS memorandum to D/MS from C/Plans and Support  
Staff, dated 25 July 1978

1. Per your request, NFAC MAG has reviewed the correspondence relating to the Emergency After-Hours Medical Treatment proposal made to the DCI on 15 March 1978. We are pleased with the action taken to date but are disappointed that the proposal cannot be implemented quickly.

2. The intent of our proposal was to develop a system whereby emergency medical care could be provided to employees working rotational shifts. We understand that up to 20 minutes can elapse from the time the McLean Rescue Squad is notified to the arrival of an ambulance at the scene. In cases of heart attacks for example, it is important that cardiopulmonary resuscitation (CPR) be administered within five minutes of the emergency in order to prevent death or brain damage. Thus implementation of our proposal would help to fill this critical gap in medical coverage.

3. The NFAC MAG believes that the requirement to have 12 employees certified as Level I Emergency Medical Technicians (EMT) to man a duty roster is unrealistically high. The number of volunteers identified by OMS (10) is probably all the Agency personnel who are so qualified. We agree that to train individuals to acquire that skill level would further delay implementation.

SUBJECT: Emergency After-Hours Medical Treatment

4. To speed implementation of the Emergency After-Hours Medical Treatment proposal, we suggest that the following initial actions be taken:

- a. OMS should develop a duty roster based on individuals who are certified in CPR and basic first aid rather than Level I EMTs.
- b. Agency offices should authorize and encourage their employees who work night shifts to avail themselves of the CPR and first aid training courses offered by OMS. These are listed in the current OTR Catalog of Courses and are offered upon request. The manpower for a duty roster could come from personnel so trained.
- c. Personnel working after-hours shifts should be briefed periodically on the procedures to follow when a medical emergency occurs in their office.
- d. Develop procedures to decrease the response time of the McLean Rescue Squad. We understand that the main reason for delay is in getting ambulance personnel into the building and to the scene of the emergency. At the very least, the rescue squad should be told where to enter the building, the gate and entrance guards should be alerted to the fact that the ambulance is coming and an escort should be waiting at the building entrance to lead the ambulance personnel to the scene of the emergency.

This initial program could be upgraded in the future if an adequate number of personnel is willing and able to obtain the training necessary to receive certification as Level I EMTs.

5. The NFAC MAG will submit a revision of the article in the June 1978 MAG Newsletter to reflect the current status of this proposal.

6. We would appreciate being kept informed of the future progress STATINTL of this proposal.

DDA Distribution:

Orig - D/MS

1 - D/Sec

1 - DDA Subj



DD/A Registry

78-1263/10

22 September 1978

STATINTL MEMORANDUM FOR: [REDACTED]  
Associate Director - Management/NFAC

STATINTL VIA : [REDACTED]  
EO/NFAC

STATINTL FROM : [REDACTED]  
Chairman, NFAC MAG

SUBJECT : Emergency After-Hours Medical Treatment

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7 August 1978

b. OMS memorandum to D/MS from C/Plans and Support  
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Orig - D/MS

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~~Administrative - Internal Use Only~~

OFFICIAL ROUTING SLIP

TO	NAME AND ADDRESS	DATE	INITIALS
1	D/MS		
2	Att: Dr. Blake		
3	1 D 4061 Hqs		
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ACTION	DIRECT REPLY	PREPARE REPLY
APPROVAL	DISPATCH	RECOMMENDATION
COMMENT	FILE	RETURN
CONCURRENCE	INFORMATION	SIGNATURE

Att: DDA 78-1203/10

Remarks:

Charly  
 In replying to this, I suggest you have Security commnet on Para 4.d

cc: D/Sec

FOLD HERE TO R

FROM: NAME, ADDRESS AND PHONE NO.	DATE
Deputy Director for Administration 7D 24 Hqs.	28 Sep 78

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FORM NO. 1-67 237 Use previous editions

(40)

STATINTL

STATOTHR

"Charly  
 "In replying to this, I suggest you have Security commnet on Para 4.d. /s/Jack Blake"

DDA:JFBBlake:kmg (28 Sep 78)

Distribution:

- Orig RS - D/MS w/Orig of Att
- 1 - D/Sec w/cy of Att
- 1 - DDA Subj w/cy of Att
- 1 - DDA Chrono
- 1 - JFB Chrono

Att: Memo dtd 22 Sep 78 to AD-M/NFAC via EO/NFAC fr

Chun, NEAC MAG, subj: Emergency After-Hours  
 Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2  
 Medical Treatment (DDA 78-1203/10)

DD/A Registry  
File Medical

MEMORANDUM FOR: Associate Deputy Director for  
Administration

Mike

*D/OMS*

Here is the MAG response to OMS  
memos on Emergency After-Hours Medical  
Treatment.

AD-M/NFAC

Attachment

Date 27 September 1978

FORM 5-75 101 USE PREVIOUS EDITIONS

8/7/78

Bruce:

Re attached memo - Pete's memo is a good one. You might touch base with him to see if it would be good to advertise through an Agency-wide notice requesting State-certified paramedic volunteers. His memo indicates that he contacted only those offices that had requested such service.

After Jack Blake is made aware of this you might have Pete touch base with NFAC MAG to explain the problems in implementing this service.

Bob Z.

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# ROUTING AND RECORD SHEET

SUBJECT: (Optional)

Emergency After-Hours Medical Treatment

FROM:

Director of Medical Services

EXTENSION

NO.

DATE

7 August 1978

STATO THR

TO: (Officer designation, room number, and building)

DATE

OFFICER'S INITIALS

COMMENTS (Number each comment to show from whom to whom. Draw a line across column after each comment.)

EO/DON

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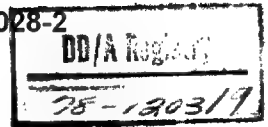
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Include  
w/ note  
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7 August 1978

MEMORANDUM FOR: Deputy Director for Administration

FROM: Charles A. Bohrer, M.D.  
Director of Medical Services

SUBJECT: Emergency After-Hours Medical Treatment

REFERENCES: (a) DD/A 78-1203/2 dated 20 Apr 78, Same Subj.  
(b) OMS Memo to D/MS from C/Plans & Support  
Staff dated 25 July 1978  
(c) MAG Newsletter, June 1978

1. Because of the inadequate response of qualified individuals willing to participate in this program as stated in paragraphs 3 and 6 of reference b, I must regretfully request that NFAC MAG be advised that it is not possible to initiate the program at this time. NFAC MAG may wish to modify the announcement regarding the program which was made in the June 1978 MAG Newsletter (reference c).

25X1A 2. [REDACTED] Chief of Plans & Support Staff/OMS, offers in paragraph 7 of his memo (reference b) three alternatives for consideration and possible review by NFAC MAG if you desire. Because of limited capabilities, OMS does not have the manpower or funds to staff such an after-hours program, so I cannot support alternative b.

3. I doubt if there will be a significant response to the alternative a in view of the very limited response to the current request. Even if there were an adequate response, the 90-100 hours of training required would take some time to acquire.

4. It is my recommendation to you that alternative c be pursued.

25X1A

[REDACTED]  
Charles A. Bohrer, M.D.

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Downgrade to A/IUO  
Upon Removal of  
Reference c

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# ROUTING AND RECORD SHEET

SUBJECT: (Optional)

FROM:		EXTENSION	NO.
Chief, Plans & Support Staff			DATE 25 July 1978
TO: (Officer designation, room number, and building)	DATE		OFFICER'S INITIALS
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Form 8-66 163a

REFERENCE

B

ATTACHMENT

Approved For Release 2001/11/08 : CIA-RDP81-00142R000200100028-2



25 July 1978

MEMORANDUM FOR: Director of Medical Services

FROM: [REDACTED]

Chief, Plans and Support Staff

SUBJECT: Emergency After-Hours Medical Treatment

REFERENCE: DDA Memorandum to the DCI dated  
20 April 1978, same subject  
(DDA 78-1203/2)

1. This memorandum outlines the steps OMS has taken to organize a formal after-hours emergency medical program through the volunteer services of employees who are state-certified paramedics.

2. A study was undertaken to identify the offices in the Headquarters compound that employ personnel after normal working hours and to determine the number of employees who might benefit from such a program. Further, this figure would also determine the size of the group from which we would seek volunteers. The study showed that nine different offices employ a combined total of 417 personnel after normal working hours - 231 on the evening shift and 186 on the midnight shift.

3. On 30 May 1978 an OMS memorandum was forwarded to those offices requesting state-certified paramedic volunteers for the purpose of establishing an after-hours emergency medical service (EMS) and that this service would augment what is already provided by the McLean Volunteer Fire Department (MVFD). After seven weeks only 10 volunteers' names were received by OMS. Of the 10 volunteers, six worked the day shift, two are assigned to domestic bases, and only two have rotational shifts that would permit them to participate in the EMS program.

4. The proposed plan calls for a rotational roster of a minimum of 12 volunteers - six who work in the Headquarters Building and six who work in the Printing and Photography

Building. This arrangement would allow for an EMS duty officer to respond and carry out life-saving techniques within seconds of an emergency. Further, the intent of the EMS service is to fill the void from the actual time of the emergency to the time it takes the MVFD to arrive at the scene of the emergency. (The MVFD advised that it takes their rescue squad an average of three minutes to arrive at the Headquarters compound and then another five minutes to get to the victim.)

5. The Office of Security, Safety Staff statistics indicate there were 29 after-hours medical emergencies in the Headquarters compound over the past six months. From this information it can be concluded that an EMS duty officer could have played a role in the early management of many of those medical emergencies.

6. Such a program would not be overly expensive. The initial cost of equipping two EMS duty officers would be \$2500 with an estimated cost per annum for resupply of less than \$500. The use of Agency state-certified paramedic volunteers as first responders to after-hours medical emergencies has merit. We learned during this study that many offices heartily endorse the concept of an EMS program. In spite of this, OMS will not have a sufficient number of qualified volunteers to staff even a modest program. Therefore, it is recommended that an Agency EMS program be deferred until alternate methods of staffing this program or improving on the existing program can be considered by the NFAC MAG.

7. The following suggested alternatives are offered for NFAC MAG consideration:

a. Poll the 417 employees who work rotational shifts to determine whether they would be interested and willing to enroll, on their own time, in an external state-certified emergency medical technician (EMT) program. (90 - 100 hours of training are required for Level I EMT certification.)

b. Conduct a study to determine whether a program using MM staff and contract paramedic personnel could be authorized in accordance with

5 U.S.C., 7901 Chapter 79, "Service to Employees - Health Services Program" and Bureau of the Budget Circular No. A-72 dated 18 June 1965.

c. Continue with the service now provided by MVFD with a view toward reviewing the current procedures and cutting down on the time (five minutes) it takes the rescue squad to get to the victim after they arrive at the Headquarters compound.

8. The Plans and Support Staff is available to assist the NFAC MAG should they require any further assistance in this matter.



STATINTL



# MAG Newsletter

Published by DCI MAG, 7E13

June 1978

## DCI MAG MEETING WITH MR. CARLUCCI

The new DDCI, Mr. Carlucci, met with the DCI MAG in mid-April to give us his first impressions on the status of the Agency and to discuss several problems he is concerned with that might interest the MAG. With respect to allegations of Agency wrong-doing, Mr. Carlucci noted that if the Agency has been at fault, it was largely in trying to be too responsive to the political powers that made decisions on what they would like the Agency to do. He sees attitudes toward the Agency as being cyclical and believes that opinion is starting to swing around toward support for the Agency. Even on the Hill, the mood is changing—former critics are showing concern for the Agency's effectiveness. These changes have been helped along by Soviet actions in Africa. Indicative of the changing attitude is the favorable reaction to our budget request.

The DDCI advised that he was distressed by the lack of cross-cutting managerial tools. He thinks that we need some planning/evaluations/systems managing capacity that cuts across all areas of the Agency. This doesn't necessarily mean centralization; there are good reasons for decentralization. But for us to respond more coherently and more rapidly as a single Agency, we do need more common goals, common standards, and better coordinating and reporting mechanisms. We may be happy doing what we are doing—but it may not be relevant. Mr. Carlucci is seeking a management information system which will permit him to give the proper guidance.

The DCI MAG paper on "The CIA Personnel System," previously submitted to the DCI, was praised by Mr. Carlucci, who indicated it had been useful to him in sorting out personnel questions. He reviewed briefly some of his recent personnel initiatives—on establishing a more uniform promotion system, creating a secretarial and clerical career service, and reaffirming criteria for enrollment in management and senior officer schools.

Mr. Carlucci suggested that the DCI MAG could usefully involve itself in the following subjects: contribute to drafting precepts to guide the work of promotion panels, including some precepts that are common to all the directorates; comment on the paper prepared by the Agency task force studying the fitness report procedure; suggest ways to make the EEO program more effective; address the question of Agency priorities—how can priorities

Form 163a  
8-66

ATTACHMENT

REFER

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be clarified at all levels; and examine the question of risk-taking and dissent—how to preserve (or recover) the traditional willingness of Agency personnel to take chances or express unpopular views. In response to Mr. Carlucci's interest, the DCI MAG is now working on these topics. An initial effort on risk-taking and a paper reviewing past history and current needs for Agency-wide management systems have already been prepared and passed to the DDCI.

**SECRETARIAL/CLERICAL MAG ACTIVITIES**

The DCI Secretarial/Clerical Management Advisory Group (S/C MAG) was established by the Director as a result of a recommendation made by a secretarial group with which he met in late 1977. The first meeting of the S/C MAG was held on 20 January 1978, and the first order of business was to draft a Charter, which was approved on 2 March.

25X1A

The activities of the S/C MAG to date have included publishing [REDACTED] notifying all employees of the S/C MAG's existence; meeting with the Management Advisory Groups in each of the Directorates and the "E" Career Service; providing comments to Agency management on the leave without pay policy for employees accompanying spouses overseas; and commenting on the Agency's EEO Plan. The group is currently offering comments on the Child Care Center Study survey to be conducted by the Agency and preparing comments on the new secretarial/clerical career management panels. Employees who have suggestions or relevant comments on any current S/C MAG issues or other related matters can contact their Directorate representatives or forward them to S/C MAG, Room 7-E-13, Headquarters.

**NFAC MAG ARRANGES APPROVAL FOR "PARAMEDICS"**

One of the points raised by the NFAC MAG in its March meeting with the Director was the critical time delay that exists while an ambulance is en route to provide after-hours medical assistance. It was noted that there are Agency employees working after normal duty hours who are state-certified "paramedics," but that past efforts to gain approval for them to assist Agency employees with medical emergencies had foundered as a result of medical and legal questions.

As a result of the NFAC MAG initiative, which in turn came from an employee initiative, this question was reopened and favorably resolved. A list of state-certified "paramedics" who are employed by the Agency outside normal duty hours, when our own medical office is normally closed, will be on file with the Office of Security [REDACTED] and the Operations Center [REDACTED]. When an emergency occurs, a paramedic will be notified to render medical assistance while awaiting the arrival of the emergency vehicle. This service could be upgraded at some later date if conditions warrant a more extensive program.

25X1A

25X1A